•								Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2003									lor	-0	01		
CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY TYPE			OR	OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			19				RA	TE	FEE	]	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		BASI	C FEE	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			/9 minus 20=		· Q		X\$	X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS			3 minus 3 =		* O		X4	X43=		OR	X86=		
MU	ILTIPLE DEPEN	IDENT CLAIM P	RESENT	•				+145=		OR	+290=		
* If	the difference	in column 1 is	ess than zero, enter "0" in column 2			TOT	ΓAL	385	OR	TOTAL			
CLAIMS AS AMENDED - PART II										OTHER THAN			
		(Column 1)		(Colun		(Column 3)	7 <del>,                                   </del>			OR 1	SMALL		
AMENDMENT A		REMAINING AFTER AMENDMENT		NUME PREVIO PAID	BER DUSLY	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	X\$	9=		OR	X\$18=		
	Independent	*	Minus	***		=	X4:	3=		OR	X86=		
Ľ	FIRST PRESE	NTATION OF M	JUIPLE DEF	PENDENT	CLAIM		+14	5=		OR	+290=		
	·							TOTAL ADDIT, FEE			OR ADDIT, FEE		
	(Column 1) (Column 2) (Column 3)						ADDII.						
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIC PAID	BER DUSLY	PRESENT EXTRA	RA <sup>-</sup>	ΓΕ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	<b>X</b> \$	9=		OR	X\$18=		
	Independent	*	Minus	***	0.4.14	=	X43	3=		OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEI			PENDENT CLAIM			+14	5=		OR	+290=	,	
	ADDI										TOTAL ADDIT. FEE	•	
		ADDII.	1 66			-DDII: 1 EE							
AMENDMENT C	`	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Colun HIGHI NUME PREVIC PAID I	EST BER OUSLY	PRESENT EXTRA	RAT	Έ	ADDI- TIONAL FEE	`	RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**	. <u></u> .	=	X\$ 9	9=		OR	X\$18=		
ME	Independent	*	Minus	***		=	X43	=		or OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									1	1200-		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+290= TOTAL	-	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ADDIT. FEE											ADDIT. FEE		
	The "Highest Num	nber Previously Pai	d For" (Total or ·	Independe	ent) is the	highest number f	ound in th	ne app	propriate box	in col	umn 1.		